SCC eFile 2012 ANNUAL REPORT 212517945 COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION						
1.) CORPORATION NAME:			DUE DATE: 6/30/2012			
GOOCHLAND RECREATIONAL CENTER INCORPORATED 2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: EARLINE T PACE			SCC ID NO: 00938639			
PO BOX 33 GOOCHLAND, VA 23063			5.) STOCK INFORMATION CLASS AUTHORIZED			
3.) CITY OR COUNTY OF VA REG GOOCHLAND COUNTY	ISTERED OFFICE:					
4.) STATE OR COUNTRY OF INCO VA	DRPORATION:					
6.) PRINCIPAL OFFICE ADDRESS	:					
ADDRESS: 6205 PICCADILLY ROAD						
CITY/ST/ZIP: RICHMOND, VA 23231						
7.) DIRECTORS AND PRINCIPAL (officers must be th a director and	e listed. An individual an officer.		
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Richard J Taylor PRESIDENT 1033 Pothole Road Manakin-Sabot, VA 23103	X OFFIC	ER	X DIRECTOR		
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	James J Trent VICE PRESIDENT 1601 Manakin Rd MANAKIN-SABOT, VA 23103	X OFFIC	ER	X DIRECTOR		
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Jane J Allen-Bowles TREASURER 2667 Broad Street Road Gum Spring, VA 23065	X OFFIC	ER	X DIRECTOR		
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Eva C Anthony Financial Secty P O Box 73 Goochland, VA 23063	X OFFIC	ER	X DIRECTOR		
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JEWELL WILSON SECRETARY 4501 RIDDLES BRIDGE ROAD GOOCHLAND, VA 23063	X OFFIC	ER	x DIRECTOR		
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	James H Bowles, M D Pres. Emeritus 2667 Broad Street Road Gum Spring, VA 23065	OFFIC	ER	X DIRECTOR		

		OFFICER	X DIRECTOR			
NAME:	Earline T Pace					
TITLE:	DIRECTOR					
ADDRESS:	3506 Pace Town RD					
CITY/ST/ZIP/CO:	Sandy Hook, VA 23153					
		OFFICER	X DIRECTOR			
NAME:	Mary Y Lewis					
TITLE:	DIRECTOR					
ADDRESS:	507 Ironington RD					
CITY/ST/ZIP/CO:	Richmond, VA 23227					
	·	OFFICER	χ DIRECTOR			
NAME:	Brenda S. Ahmad	01110211				
TITLE:	Events					
ADDRESS:	1425 Sargent RD					
CITY/ST/ZIP/CO:	Crozier, VA 23039					
	0.02.0., 7.7.2000	OFFICER	x DIRECTOR			
NIANAT.		OFFICER	X DIRECTOR			
NAME: TITLE:	Linwood Cowan					
ADDRESS:	Hospitality 3396 Pace Road					
CITY/ST/ZIP/CO:	Goochland, VA 23063					
GIT 1/61/211 /66.	Goodfiland, VA 23003					
		OFFICER	X DIRECTOR			
NAME:	Rev. Wayne J. Allen					
TITLE:	Chaplain					
ADDRESS:	P O Box 51					
CITY/ST/ZIP/CO:	Oilville, VA 23129					
I AFFIRM THAT THE INFORMA						
COMPLETE AS OF THE DATE	BELOW AND THAT I AM LEGA	LLY AUTHORIZED TO	SIGN THIS REPORT.			
/s/ Richard J Taylor	Richard J Taylor, PRES		5/14/2012			
SIGNATURE OF DIRECTOR/OFF		ORPORATE	DATE			
LISTED IN THIS REPORT	TITLE					
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material						
respect with the intent that the document be delivered to the Commission for filing.						